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			Filing Date		er 27, 2000	RECLIVE	
			First Named Inventor		Pastan, Ira H.		
			Art Unit		1642 JUN 0 6 200		
			iner Name	Helms, L	arry R.	OFNITED 160	
Total Number of Pages in This Submission /8		Attorn	Attorney Docket Number 015		339100US	TECH CENTER 199	
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Response to Missing Parts/ Incomplete Application							
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Firm Townsend and Townsend and Crew LLP							
or Individual Laurence J. Hyman Reg. No. 35,551							
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Date 06/02/2003							
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se through 04/30/2003. OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Patent and Trauemank Office. 3.5. Services and Trauemank Office. 3 FEE TRANSMITTAL 09/581,345 Application Number for FY 2003 September 27, 2000 Filing Date Effective 01/01/2003. Patent fees are subject to annual revision. First Named Inventor Pastan, Ira H. <del>JUN 0 6</del> Applicant claims small entity status. See 37 CFR 1.27 **Examiner Name** Helms, Larry R. 1642 Art Unit ECH CENTER 1600/2900 TOTAL AMOUNT OF PAYMENT 015280-339100US 410 Attorney Docket No. METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) 3. ADDITIONAL FEES Credit Card MoneyOrder Other None Entity Small Entity Large Deposit Account Fee Fee Fee Fee Description Deposit Code (\$) Code (\$) Paid Account 20-1430 1051 2051 Surcharge - late filing fee or oath 130 65 Number Surcharge - late provisional filing fee 1052 2052 25 50 or cover sheet. Deposit 1053 130 1053 130 Non-English specification Townsend and Townsend and Crew LLP Account 1812 1812 For filing a request for reexamination 2.520 2.520 Name 1804 920\* 1804 Requesting publication of SIR prior to The Commissioner is authorized to: (check all that apply) Examiner action Charge fee(s) indicated below Credit any overpayments 1805 1,8401 1805 1,840\* Requesting publication of SIR after Charge any additional fee(s) during the pendency of this application Examiner action Extension for reply within first month Charge fee(s) indicated below, except for the filing fee 1251 110 2251 55 to the above-identified deposit account 2252 1252 410 205 Extension for reply within second 410 **FEE CALCULATION** Extension for reply within third month 2253 465 1253 930 **BASIC FILING FEE** 1254 1,450 2254 725 Extension for reply within fourth Large Entity Small Entity month Fee Fee Fee Fee Description 1255 1.970 2255 985 Extension for reply within fifth month Fee Fee Paid Code (\$) Code (\$) 1401 320 2401 160 Notice of Appeal 1001 750 2001 375 Utility filing fee 1402 320 2402 160 Filing a brief in support of an appeal 1002 330 2002 165 Design filing fee 1403 280 2403 140 Request for oral hearing 1003 520 2003 260 Plant filing fee Petition to institute a public use 1451 1451 1,510 1,510 2004 375 1004 750 Reissue filina fee proceeding 1005 160 2005 80 Provisional filing fee 1452 110 2452 55 Petition to revive - unavoidable 1453 2453 650 Petition to revive - unintentional 1,300 SUBTOTAL (1) (\$) 1501 1,300 2501 650 Utility issue fee (or reissue) 1502 470 2502 235 Design issue fee 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 2503 Plant issue fee 1503 630 315 Fees from 1460 130 1460 130 Petitions to the Commissioner Extra Claims Fee Paid below 1807 50 1807 50 Petitions related to provisional **Total Claims** applications 1806 Submission of Information Disclosure 1806 180 180 Independent Claims 8021 8021 40 40 Recording each patent assignment Multiple per property (times number of Dependent properties) arge Entity Small Entity 2809 375 Filing a submission after final rejection 1809 750 (37 CFR § 1.129(a)) ee Fee Fee Description For each additional invention to be Code 1810 750 2810 375 Code (\$) (\$) examined (37 CFR § 1.129(b)) 1202 2202 Claims in excess of 20 18 9 Request for Continued Examination 1201 84 2201 42 Independent claims in excess of 3 750 2801 375 1801 (RCE) Multiple dependent claim, if not paid 1203 280 2203 140 Request for expedited examination 1802 900 1802 900 \* Reissue independent claims 1204 84 2204 of a design application over original patent \*\* Reissue claims in excess of 20 Other fee (specify) 1205 2205 18 and over original patent (\$)410 \*Reduced by Basic Filing Fee Paid SUBTOTAL (3) SUBTOTAL (2) (\$) or number previously paid, if greater; For Reissues, see above Complete (if applicable) SUBMITTED BY Registration No. (Attomey/Agent) 415-576-0200 35.551 Telephone Name (Print/Type) Laurence J. Hyman 06/02/2003 Signature

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